

DONATION FORM

Chautauqua County Historical Society P.O. Box 7 Westfield, New York 14787

| TODAY'S DATE/ | / | | |
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| DONATION AMOUNT: | | | |
| PLEASE DESIGNATE MY DONATION TO: | | | |
| ☐ General Operating Expense | | | |
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| ☐ Restricted Account | | | |
| ☐ Memorial | | | |
| ☐ In honor of | | | |

Please make checks payable to CCHS. Thank you for your support.

All donations are tax deductible to the extent allowable by law.